

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SAVE AMERICA FROM ITS GOVERNMENT</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00625574	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>METRO NEWSPAPER ADVERTISING SERVICES, INC.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 03 / 2016</b>	
Mailing Address <b>1 RXR PLAZA LOCKBOX 10430</b>		Amount <b>2400428.11</b>	
City <b>UNIONDALE</b>	State <b>NY</b>	Zip Code <b>11555</b>	Transaction ID : <b>SE.4351</b>
Purpose of Expenditure <b>MEDIA PLACEMENT</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 01 / 2016</b>	
Name of Federal Candidate <b>TRUMP, DONALD J., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <b>3415287.71</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>2400428.11</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>2400428.11</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DATWYLER, THOMAS, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 04 / 2016**

Signature